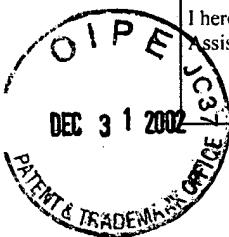


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Assistant Commissioner for Patents, Washington, D.C. 20231, on December 23, 2002.

*Tami M. Procopio*  
Tami M. Procopio



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Daniel E. H. AFAR, *et al.*

Serial No.: 09/887,593

Filing Date: 21 June 2001

For: BPC-1: A SECRETED BRAIN-  
SPECIFIC PROTEIN EXPRESSED AND  
SECRETED BY PROSTATE AND  
BLADDER CANCER CELLS

Examiner: Gary B. Nickol, Ph.D.

Group Art Unit: 1642

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JAN 06 2003

TECH CENTER 1600/2900

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AMENDMENT UNDER 37 C.F.R. § 1.111

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

This is in response to an Office action herein mailed 21 August 2002, time for response to which was set to expire 21 September 2002. A petition for an extension of time of three (3) months until 21 December 2002 is attached hereto, along with the required fee. Restriction was required among 14 groups. Applicants elect to prosecute claims directed to methods of altering the course of cancer/cancer cells as set forth in groups IX (claims 56-57), X (claims 35, 58-59), XI (claims 60-65), XII (claims 66 and 68), and XIII (claim 67). The claimed methods also contain an element of detection as the effect of the methods indicates the

presence or absence of the underlying condition. Applicants believe that all of these groups contain claims directed to the same patentable invention. If forced to elect among these groups, applicants elect to prosecute the invention of group XII (claims 66, 68). However, reconsideration of the restriction in light of the following claims is respectfully requested.

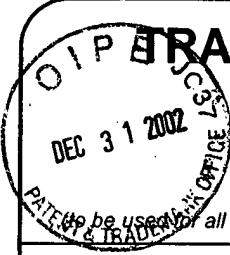
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1642/p

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)  
Approved for use through 10/31/02. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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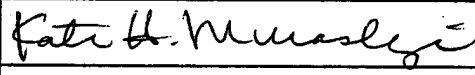
<b>TRANSMITTAL FORM</b>  <small>Do not be used for all correspondence after initial filing</small>	Application Number	09/887,593	<b>RECEIVED</b> <b>JAN 06 2003</b> <b>TECH CENTER 1600/2900</b>
	Filing Date	21 June 2001	
	First Named Inventor	Daniel E. H. AFAR, et al.	
	Group Art Unit	1642	
	Examiner Name	G. B. Nickol	
Total Number Of Pages In This Submission	14	Attorney Docket No.	511582001810

**ENCLOSURES (check all that apply)**

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                             | <input type="checkbox"/> Assignment Papers                                | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input checked="" type="checkbox"/> Amendment / Reply                                | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition   | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declarations                                     | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter   |
| <input checked="" type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
| <input type="checkbox"/> Express Abandonment Request                                 | <input type="checkbox"/> Terminal Disclaimer                              | <input checked="" type="checkbox"/> Return Postcard  |
| <input type="checkbox"/> Information Disclosure Statement, PTO Form 1449, References | <input type="checkbox"/> Request for Refund                               | <input type="checkbox"/>   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                      | <input type="checkbox"/> CD, Number of CD(s) _____                        | <input type="checkbox"/>   |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application           |   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53      |   |  |

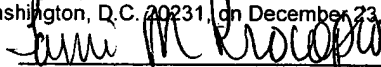
Remarks

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm or Individual Name	Kate H. Murashige Reg. No. 29,959 Morrison & Foerster LLP 3811 Valley Centre Drive, Suite 500, San Diego, California 92130
Signature	
Date	December 23, 2002

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Tami M. Procopio

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**FEE TRANSMITTAL  
FOR FY 2002**

DEC 31 2002

PATENT &amp; TRADEMARK OFFICE

Patent fees are subject to annual revision.

**Complete if Known**

Application Number	09/887,593
Filing Date	21 June 2001
First Named Inventor	Daniel E. H. AFAR, et al.
Examiner Name	G. B. Nickol
Group Art Unit	1642

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**TOTAL AMOUNT OF PAYMENT**

(\$ 460.00)

Attorney Docket No. 511582001810

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 03-1952

Deposit Account Name Morrison &amp; Foerster LLP

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☒
- Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit Card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0)

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
- 20** =	*	x	= \$
Independent Claims	- 3** =	*	x
Multiple Dependent			= \$

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claims, if not paid	
109	84	209	42	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$ 0)

\*\* or number previously paid, if greater; For reissues, see above.

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	460
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions of the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per properties (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 460.00)

**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Kate H. Murashige	Registration No. (Attorney/Agent)	29,959	Telephone	(858) 720-5112
Signature	<i>Kate H. Murashige</i>			Date	December 23, 2002

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